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Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Effective on 12/08/2004. Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number 10/735,374 FEE TRANSMITTAL Filing Date December 12, 2003 For FY 2008 First Named Inventor Betty Shu Mercer et al. Examiner Name Leonardo Andujar Applicant claims small entity status. See 37 CFR 1,27 Art Unit 2826 **TOTAL AMOUNT OF PAYMENT** 810.00 Attorney Docket No. TI-36853 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account ✓ Deposit Account: Deposit Account Number: 20-0668 Deposit Account Name: Texas Instruments Incorporated For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) ✓ Credit any overpayments under 37 CFR 1:16 and 1:17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity Small Entity Application Type** Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) **Utility** 310 155 510 255 210 105 Design 210 105 100 50 130 65 Plant 210 105 310 160 155 80 Reissue 310 155 510 255 620 310 Provisional 210 105 0 0 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee Description Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 210 105 Multiple dependent claims 370 185 **Total Claims** Multiple Dependent Claims Extra Claims Fee (\$) - 20 or HP = 50.00 Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20, Indep. Claims **Extra Claims** Fee (\$) Fee Paid (\$) - 3 or HP = 210.00 HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee Paid (\$) (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Request for Continued Examination (RCE) 810.00 SUBMITTED BY Registration No. Telephone (216) 502-0600 Signature /Thomas G. Eschweiler/ 36,981 Date September 8, 2008 Name (Print/Type) Thomas G. Eschweiler

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.